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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.	FILING DATE			
							APPLICANT(S)	09/763843			
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.					
1	1						51				
2		1					52				
3		2					53				
4	1						54				
5		1					55				
6		2					56				
7	1						57				
8		1					58				
9		2					59				
10							60				
11							61				
12							62				
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39							89				
40							90				
41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	3						TOTAL IND.				
TOTAL DEP.		9					TOTAL DEP.				
TOTAL CLAIMS	12						TOTAL CLAIMS				

PTO-1360 (7-76)

MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT OF COMMERCE